	FILE 'MEDL'	INE, EMBASE, BIOSIS' ENTERED AT 07:13:36 ON 06 SEP 2002
Ll	56175	S EBV OR EPSTEIN BARR VIRUS
L2	297067	S ASSAY AND DETECT?
L3		S L1 AND L2
L4	113164	S LUPUS OR SLE OR SYSTEMIC LUPUS ERYTHEMATOSUS
L5		S L3 AND L4
L6	20	DUP REM L5 (22 DUPLICATES REMOVED)
L7	6221	S ASSAY (W) DETECT?
L8		S L1 AND L7
L9	37	DUP REM L8 (30 DUPLICATES REMOVED)

This is applicant's - when was it published?

L6 ANSWER 12 OF 20 EMBASE COPYRIGHT 2002 ELSEVIER SCI. B.V.

ACCESSION NUMBER:

1998015182 EMBASE

TITLE:

An increased prevalence of Epstein-Barr

virus infection in young patients suggests a

possible etiology for systemic lupus

erythematosus.

AUTHOR:

SOURCE:

James J.A.; Kaufman K.M.; Farris A.D.; Taylor-Albert E.;

Lehman T.J.A.; Harley J.B.

CORPORATE SOURCE:

J.A. James, University of Oklahoma, Oklahoma Medical

Research Foundation, 825 N.E. Thirteenth, Oklahoma City, OK

73104, United States. john-harley@omrf.ouhsc.edu Journal of Clinical Investigation, (1997) 100/12

(3019-3026).

Refs: 36

ISSN: 0021-9738 CODEN: JCINAO

COUNTRY:

United States
Journal; Article

DOCUMENT TYPE: FILE SEGMENT:

004 Microbiology 026 Immunology, Serology and Transplantation

LANGUAGE:

English

SUMMARY LANGUAGE:

English

AB An unknown environmental agent has been suspected to induce

systemic lupus erythematosus (lupus)

in man. Prompted by our recent immunochemical findings, we sought evidence

for an association between Epstein-Barr virus

infection and lupus. Because the vast majority of adults have

been infected with Epstein-Barr virus, we

chose to study children and young adults. Virtually all (116 of 117, or

99%) of these young patients had seroconverted against Epstein-

Barr virus, as compared with only 70% (107 of 153) of

their controls (odds ratio 49.9, 95% confidence interval 9.3-1025, P <

0.0000000001). The difference in the rate of Epstein-

Barr virus seroconversion could not be explained by

serum IgG level or by cross-reacting anti-Sm/nRNP autoantibodies. No similar difference was found in the seroconversion rates against four

other herpes viruses. An assay for Epstein- Barr viral DNA in

peripheral blood lymphocytes established Epstein-Barr

virus infection in the peripheral blood of all 32 of the

lupus patients tested, while only 23 of the 32 matched controls

were infected (odds ratio > 10, 95% confidence interval 2.53-.infin., P <

0.002). When considered with other evidence supporting a relationship

between Epstein-Barr virus and lupus

, these data are consistent with, but do not in themselves establish,

 ${\bf Epstein\text{-}Barr\ virus\ } {\bf infection\ } {\bf as\ } {\bf an\ } {\bf etiologic}$ 

factor in lupus.

L6 ANSWER 1 OF 20 MEDLINE DUPLICATE 1

ACCESSION NUMBER: 2

2002185361 MEDLINE

DOCUMENT NUMBER:

21916414 PubMed ID: 11920408

TITLE:

Autoantibody to hLSm4 and the heptameric LSm complex in

anti-Sm sera.

AUTHOR:

Eystathioy Theophany; Peebles Carol L; Hamel John C; Vaughn

John H; Chan Edward K L

CORPORATE SOURCE:

Scripps Research Institute, La Jolla, California 92037,

USA.

CONTRACT NUMBER:

M01-RR-00833 (NCRR)

SOURCE:

ARTHRITIS AND RHEUMATISM, (2002 Mar) 46 (3) 726-34.

Journal code: 0370605. ISSN: 0004-3591.

PUB. COUNTRY:

United States

DOCUMENT TYPE:

Journal; Article; (JOURNAL ARTICLE)

LANGUAGE:

English

FILE SEGMENT:

Abridged Index Medicus Journals; Priority Journals

ENTRY MONTH:

200204

ENTRY DATE:

Entered STN: 20020403

Last Updated on STN: 20020416

Entered Medline: 20020415

AB OBJECTIVE: To characterize the 15-kd human SmD-like autoantigen and its associated proteins previously shown to be recognized by IgM antibodies in patients with **Epstein-Barr virus** (

EBV)-induced infectious mononucleosis. METHODS: The full-length complementary DNA for the 15-kd protein was expressed as recombinant protein and analyzed for reactivity using biochemical analysis and immunoprecipitation (IP). RESULTS: The 15-kd protein was determined to be the human like-Sm protein LSm4 (hLSm4). Rabbit antibody raised against the C-terminal polypeptide immunoprecipitated a 68-kd complex composed of LSm4 together with a group of smaller proteins ranging in size from 6.5 to 14 kd, consistent with the reported heptameric LSm complexes involved in U4/U6 duplex formation and messenger RNA (mRNA) decapping/degradation.

About 80% of all anti-Sm sera from patients with systemic

lupus erythematosus (SLE) recognized the hLSm4

in vitro translated product, while 6.7% (29 of 434) immunoprecipitated from cell extracts hLSm4 together with the other members of the hLSm complex. Four sera (0.92%) showed apparently exclusive reactivity to the hLSm complex in the absence of reactivity to Sm core proteins in the IP assay. CONCLUSION: These findings document that while IgM, but not IgG, autoantibodies to LSm4 were found in sera from patients with EBV infection, IgG autoantibodies to hLSm4 are detected in a large number of anti-Sm-positive sera from patients with SLE. Importantly, in a small number of anti-Sm sera the LSm complex can be

recognized independently of the Sm core protein antigens. Our data introduce the concept that "Sm" autoantigens include Sm as well as LSm complexes involved in the maturation and degradation of mRNA.

ANSWER 4 OF 20 DUPLICATE 3 MEDLINE 1.6

MEDLINE ACCESSION NUMBER: 2002006445

21128762 PubMed ID: 11224832 DOCUMENT NUMBER: Epstein-Barr virus burden in TITLE: adolescents with systemic lupus

erythematosus.

Katz B Z; Salimi B; Kim S; Nsiah-Kumi P; Wagner-Weiner L AUTHOR:

Children's Memorial Hospital, Division of Infectious CORPORATE SOURCE:

Diseases, Chicago, IL, USA.

PEDIATRIC INFECTIOUS DISEASE JOURNAL, (2001 Feb) 20 (2) SOURCE:

148-53.

Journal code: 8701858. ISSN: 0891-3668.

United States PUB. COUNTRY:

DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)

LANGUAGE: English

FILE SEGMENT: Priority Journals

ENTRY MONTH: 200112

Entered STN: 20020121 ENTRY DATE:

Last Updated on STN: 20020121 Entered Medline: 20011205

OBJECTIVE: We sought to determine whether patients with systemic AB

lupus erythematosus (SLE) and a presumed

therapy rather than rampant infection with EBV.

primary or reactivated Epstein-Barr virus ( EBV) serologic response had evidence of an active EBV infection. BACKGROUND: Patients with SLE often have what appears to be a primary or reactivated EBV serologic response. If these patients then present with fever, fatigue, adenopathy or leukopenia, it is not clear whether these symptoms are caused by worsening SLE or EBV infection. Establishing the correct diagnosis is crucial for management. METHODS: We examined the EBV burden in 13 adolescents with SLE and a presumed primary or reactivated EBV serologic response. All were taking prednisone; 2 each were also on azathioprine or intravenous pulse cyclophosphamide. EBV serologies were performed for all, and EBV burdens were assessed via immortalization assays and EBV DNA amplification of blood and saliva at least once. RESULTS: Seven patients had serologic patterns indicative of a primary EBV infection, while six had serologies indicative of a reactivated (secondary) EBV infection. Two of the latter were the only ones in whom a small amount of biologically active **EBV** was **detected**. CONCLUSION: In our series active EBV infection was not seen in most patients, despite serologic data that could be interpreted as a primary or reactivated infection. Thus the serologic profiles were more likely a consequence of immune dysregulation secondary to SLE or its

L6 ANSWER 5 OF 20 EMBASE COPYRIGHT 2002 ELSEVIER SCI. B.V.

ACCESSION NUMBER: 2001167503 EMBASE

TITLE: Anti-insulin antibodies and the natural autoimmune response

in systemic lupus erythematosus

AUTHOR: Lidar M.; Braf A.; Givol N.; Langevitz P.; Pauzner R.; Many

A.; Livneh A.

CORPORATE SOURCE: A. Livneh, Department of Medicine F, Sheba Medical Center,

Tel-Hashomer 52621, Israel. alivneh@post.tau.ac.il

SOURCE: Lupus, (2001) 10/2 (81-86).

Refs: 35

ISSN: 0961-2033 CODEN: LUPUES

COUNTRY: United Kingdom DOCUMENT TYPE: Journal; Article

FILE SEGMENT: 026 Immunology, Serology and Transplantation

LANGUAGE: English SUMMARY LANGUAGE: English

## AB Systemic lupus erythematosus (SLE)

is characterized by the finding of ample serum autoantibodies. The role and the origin of many of these antibodies are still obscure. The aim of this work was to study the occurrence of anti-insulin antibodies (AIA) in SLE, and to postulate, based on AIA determination, on the mechanisms involved in the production of some autoantibodies in SLE. IgG and IgM AIA, anti-DNA antibodies (ADA) and anti-tetanus toxoid antibodies (ATA) were determined using ELISA in sera and B-lymphocytes culture media of 24 SLE patients, 10 healthy controls and 19 insulin-dependent diabetes mellitus (IDDM) patients. Band T-lymphocytes were isolated using Ficoll gradient, depleted of T-cells using cyclosporin A, EBV infected and grown in medium. The frequencies of IgM-AIA and IgG-ADA were higher in SLE patients than in healthy controls (P < 0.02 and P < 0.05, respectively). The rate of IqM-AIA in **SLE** and IDDM was comparable, while IqG-AIA was significantly less common in SLE than in IDDM (P < 0.05). The prevalence of ATA in SLE patients and healthy controls was similar. These findings increase the spectrum of the humoral autoimmune response in SLE and suggest that part of it (natural autoantibodies) is independent of antigen driven response.

L6 ANSWER 15 OF 20 MEDLINE DUPLICATE 11

ACCESSION NUMBER: 93282876 MEDLINE

DOCUMENT NUMBER: 93282876 PubMed ID: 8389553

TITLE: Spontaneous production of Epstein-Barr

virus by B lymphoblastoid cell lines obtained from

patients with Sjogren's syndrome. Possible involvement of a

novel strain of Epstein-Barr virus in disease pathogenesis.

AUTHOR: Tateishi M; Saito I; Yamamoto K; Miyasaka N

CORPORATE SOURCE: First Department of Medicine, Tokyo Medical and Dental

University, Japan.

SOURCE: ARTHRITIS AND RHEUMATISM, (1993 Jun) 36 (6) 827-35.

Journal code: 0370605. ISSN: 0004-3591.

PUB. COUNTRY: United States

DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)

LANGUAGE: English

FILE SEGMENT: Abridged Index Medicus Journals; Priority Journals

ENTRY MONTH: 199307

ENTRY DATE: Entered STN: 19930716

Last Updated on STN: 19970203 Entered Medline: 19930708

AB OBJECTIVE. To investigate the involvement of Epstein-

Barr virus (EBV) in the pathogenesis of

Sjogren's syndrome (SS) and to examine whether the spontaneous production of  ${\tt EBV}$  is unique to SS B cell lines. METHODS. B cell lines were established from peripheral blood mononuclear cells (PBMC) of patients

with systemic lupus erythematosus,

rheumatoid arthritis, and SS. The cord blood immortalization assay , flow cytometric analysis, and polymerase chain reaction (PCR) were used to detect EBV production by B cell lines. RESULTS. SS B cell lines produced EBV at a higher frequency, and in

significantly larger amounts, than did other B cell lines. However, no correlation with the amount of EBV DNA in the genome of B cell

lines was found. PCR analysis revealed that EBV with a

B95-8--like U2 region was dominant in SS B cell lines. CONCLUSION.

Spontaneous, massive production of EBV by B cell lines is unique

to SS, and may contribute to the polyclonal B cell activation seen in this disease.

L6 ANSWER 19 OF 20 MEDLINE DUPLICATE 13

ACCESSION NUMBER: 88081106 MEDLINE

DOCUMENT NUMBER: 88081106 PubMed ID: 2826058

TITLE: Epstein-Barr virus

transformed B cell lines derived from patients with

systemic lupus erythematosus

produce a nephritic factor of the classical complement

pathway.

AUTHOR: Hiramatsu M; Tsokos G C

CORPORATE SOURCE: Kidney Disease Section, National Institute of Diabetes and

Digestive and Kidney Diseases, Bethesda, Maryland 20892.

SOURCE: CLINICAL IMMUNOLOGY AND IMMUNOPATHOLOGY, (1988 Jan) 46 (1)

91-9.

Journal code: 0356637. ISSN: 0090-1229.

PUB. COUNTRY: United States

DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)

LANGUAGE: English

FILE SEGMENT: Priority Journals

ENTRY MONTH: 198802

ENTRY DATE: Entered STN: 19900305

Last Updated on STN: 19900305 Entered Medline: 19880217

AB Nephritic factor of the classical complement pathway (C4NeF) is an IgG antibody which stabilizes the C3 convertase (C4b2a) and has been

detected in sera from patients with systemic

lupus erythematosus (SLE) and acute

postinfectious glomerulonephritis. In order to study the production of nephritic factor (NeF), mononuclear cells were isolated from the peripheral blood of patients with  ${\tt SLE}$  and infected with

Epstein-Barr virus (EBV) to

establish active B lymphocyte cell lines. Supernatants from 15 established B cell lines, as well as from 10 B cell lines established from normal individuals, were investigated for their ability to conserve the classical and the alternative pathway C3 convertases as assessed by EAC3bBb and EAC14b2a stabilizing assays. Supernatants from 2 of 15 B cell lines from patients with SLE, but none from normal individuals, stabilized the classical C3 convertase without having any effect on the alternative pathway C3 convertase. Using anti-human Ig affinity chromatography, we showed that C4NeF activity resided in the IgG fraction; the IgG fraction containing C4NeF activity bound to the C4b2a complex, but not to C4b alone. On gel electrophoresis, following reduction, the heavy chains were slightly heavier than the heavy chains of normal IgG. We were able to isolate C4NeF from the sera of the 2 patients with SLE from whom the positive supernatants were derived, but were unable to detect any C4NeF activity in the sera of the other 13 patients and the 10 normal individuals. Serum and B cell line supernatant-derived C4NeF exhibited comparable characteristics. We conclude that C4NeF produced in vitro by EBV-transformed B cell lines derived from patients with SLE is functionally similar to the conventional C4NeF in serum. These studies confirm the production of autoantibodies by B cells with the ability to stabilize the classical pathway C3 convertase in certain patients with SLE; stabilization of the C4b2a enzyme in these patients is an apparent mechanism for the development of hypocomplementemia. Finally, preparation of homogeneous C4NeF in vitro should improve our understanding of the role of autoantibodies in complement metabolic disturbances in autoimmune diseases.

L9 ANSWER 37 OF 37 EMBASE COPYRIGHT 2002 ELSEVIER SCI. B.V.

ACCESSION NUMBER: 79199099 EMBASE

DOCUMENT NUMBER: 1979199099

TITLE: Detection of the Epstein-Barr

virus-associated antigens EA (early antigen) and

VCA (Viral capsid antigen) by direct or indirect binding of

iodinated antibodies to antigen immobilized in

polyacrylamide gel.

AUTHOR: Dolken G.; Moar M.H.; Klein G.

CORPORATE SOURCE: Dept. Tum. Biol., Karolinska Inst., S-104 01 Stockholm 60,

Sweden

SOURCE: European Journal of Cancer and Clinical Oncology, (1979)

15/5 (821-824).

CODEN: EJCAAH

COUNTRY: United Kingdom

DOCUMENT TYPE: Journal

FILE SEGMENT: 016 Cancer

047 Virology

026 Immunology, Serology and Transplantation

011 Otorhinolaryngology 023 Nuclear Medicine

LANGUAGE: English

AB Immunofluorescence has been widely used as a qualitative technique, but this method is quite unsuitable for quantitation in a biochemical study of these antigens. Radioimmunoassays using antigen immobilized in polyacrylamide gel and iodinated antibodies were already developed for MA

polyacrylamide gel and iodinated antibodies were already developed for MP and EBNA. This paper describes an assay detecting also

EA and/or VCA in the presence of EBNA.

L6 ANSWER 11 OF 20 MEDLINE DUPLICATE 8

ACCESSION NUMBER: 1

1998308611 MEDLINE

DOCUMENT NUMBER:

98308611 PubMed ID: 9644741

TITLE:

AUTHOR:

SOURCE:

[Significance of antibodies to herpesviridae viruses

detectable in rheumatic diseases].

Zhachenie vyiavliaemykh pri revmaticheskikh zabolevaniiakh

antitel k virusam semeistva herpesviridae]. Egorova O N; Balabanova R M; Chuvirov G N TERAPEVTICHESKII ARKHIV, (1998) 70 (5) 41-5.

Journal code: 2984818R. ISSN: 0040-3660.

PUB. COUNTRY: RUSSIA: Russian Federation

DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)

LANGUAGE: Russian

FILE SEGMENT: Priority Journals

ENTRY MONTH: 199807

ENTRY DATE: Entered STN: 19980811

Last Updated on STN: 19980811 Entered Medline: 19980727

AB AIM: To assay antibodies to cytomegalovirus (CMV), herpes simplex virus type 1 and 2 (HSV-1, HSV-2) and Epstein-

Barr virus (EBV) in rheumatic patients and to

clarify clinical correlations. MATERIALS AND METHODS: A total of 66 patients were examined: 7, 19, 6, 3, 5, 2 and 24 with rheumatoid arthritis

(RA), systemic lupus erythematosus (

SLE), reactive arthritis (ReA), scleroderma systematica (SS), erythema nodosum (EN), hemorrhagic vasculitis (HV), active or chronic viral infection (A/CVI), respectively. Clinical, laboratory tests, tests for specific IgM- and IgG-antibodies to CMV, HSV-1, HSV-2, EBV,

x-ray examinations were performed. RESULTS: IgG-antibodies to CMV were detected in 79%, VCA-IgG-antibodies to EBV in 70.3%,

EA-IgG-antibodies to EBV in 56.6%, IgG-antibodies to HSV-1 in

42.1% of patients. Active CMV infection was diagnosed in 27.8%, active EBV infection in 56.6%, combination of CMV and EBV

infection in 46.9% of cases. High titers of antibodies to CMV and **EBV** correlated with such symptoms as fever, arthritis, myalgia, carditis, hepatomegalia, migrating erythematous eruption. Acute-phase indices were related to high titers of antibodies to CMV and **EBV** 

. Elevated titers of antibodies to CMV and EBV were registered both in untreated patients and in patients treated with corticosteroids, nonsteroid antiinflammatory drugs and aminoquinoline drugs. CONCLUSION: In differential diagnosis of rheumatic diseases it is necessary to consider possibility of CMV and EBV infections. If these are detected, antiviral measures should be taken.

L6 ANSWER 9 OF 20 MEDLINE DUPLICATE 7

ACCESSION NUMBER: 1999327433 MEDLINE

DOCUMENT NUMBER: 99327433 PubMed ID: 10399234

TITLE: [The significance of determining antibodies to viruses of

the Herpesviridae family in rheumatic diseases]. Znachenie opredeleniia antitel k virusam semeistva Herpesviridae pri revmaticheskikh zabolevaniiakh.

AUTHOR: Egorova O N; Balabanova R M; Chuvirov G N SOURCE: TERAPEVTICHESKII ARKHIV, (1999) 71 (5) 57-61.

Journal code: 2984818R. ISSN: 0040-3660.

PUB. COUNTRY: RUSSIA: Russian Federation

DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)

LANGUAGE: Russian

FILE SEGMENT: Priority Journals

ENTRY MONTH: 199907

ENTRY DATE: Entered STN: 19990806

Last Updated on STN: 19990806 Entered Medline: 19990728

AB AIM: Assay of antibodies to cytomegalovirus (CMV), herpes simplex virus type 1 and 2 (HSV-1 and HSV-2) and Epstein-

Barr virus (EBV) in rheumatic patients.

Specification of their correlations with clinical symptoms. MATERIALS AND METHODS: 66 rheumatic patients were examined for the above antibodies. The admission diagnosis of rheumatic disease (RD) was confirmed in 42 of them. 24 were diagnosed to have active or chronic viral infection (A/CVI)

simulating systemic lupus erythematosus (

SLE), rheumatoid arthritis (RA) and other RD. RESULTS: IgG-antibodies to CMV and VCA-IgG to EBV were detected in 79 and 70.3% of the examinees, respectively. In SLE more frequent were IgM-antibodies to CMV (78.9%), in RA-IgM-antibodies to CMV (85.7%) and IgG-antibodies to EBV (85.7%) while in A/CVI--to CMV (IgM--86.4%), EBV (IgG--80%; IgM--73.7%), HSV-1 (IgM--57.1%).

Analysis of clinical correlations indicated that high titers to CMV and to **EBV** are related in RD patients. CONCLUSION: It is necessary to examine rheumatic patients for antibodies to Herpesviridae viruses and prescribe antiviral drugs.

DUPLICATE 5 ANSWER 7 OF 20 MEDLINE 1.6

ACCESSION NUMBER: 2000143514

DOCUMENT NUMBER: 20143514 PubMed ID: 10677247

Histone-containing immune complexes are to a large extent TITLE:

responsible for anti-dsDNA reactivity in the Farr

assay of active SLE patients.

Hylkema M N; van Bruggen M C; ten Hove T; de Jong J; Swaak AUTHOR:

MEDLINE

A J; Berden J H; Smeenk R J

Department of Autoimmune Diseases, CLB, Amsterdam, The CORPORATE SOURCE:

Netherlands.

JOURNAL OF AUTOIMMUNITY, (2000 Mar) 14 (2) 159-68. SOURCE:

Journal code: 8812164. ISSN: 0896-8411.

PUB. COUNTRY: ENGLAND: United Kingdom

DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)

LANGUAGE: English

Priority Journals FILE SEGMENT:

ENTRY MONTH: 200004

Entered STN: 20000505 ENTRY DATE:

> Last Updated on STN: 20000505 Entered Medline: 20000421

Increased titres of anti-dsDNA antibodies, especially if of high avidity, AB are associated with renal exacerbations in patients with systemic

lupus erythematosus (SLE). One of the most

reliable assays to measure anti-dsDNA antibodies, the Farr assay, is believed to detect preferentially high avidity antibodies. Purified non-complexed monoclonal antibodies (mAbs) against nucleosomes, obtained from mice with SLE, are not reactive in the Farr assay, but can become so once complexed to nucleosomes. These Farr-positive, nucleosome containing, immune complexes were also able to bind in vivo to the glomerular basement membrane (GBM), predominantly via heparan sulphate (HS). To evaluate whether in SLE patients the same kind of immune complexes are responsible for Farr reactivity, IqG from serum or plasma was isolated under dissociating and physiological conditions. We observed that after purification under dissociating conditions, Farr reactivity was significantly decreased (P<0.0001) in contrast to reactivity with histones and two 'control'

antigens: Epstein Barr Virus (EBV) and Ro/SS-A. Reactivity with nucleosomes also decreased after purification, although to a lesser extent. Plasma purified under physiological conditions showed no decrease in Farr reactivity. The importance of histones for the generation of immune complexes is supported by the two following observations. Firstly, the presence of histones could be demonstrated in serum and plasma of SLE patients but not in serum of healthy controls or in IgG preparations purified under dissociating conditions. Secondly, Farr reactivity of purified IgG preparations could be restored by addition of purified histones. From these studies we conclude that histones containing immune complexes are responsible for a large part of the Farr reactivity in active SLE , and are therefore indirectly implicated in the pathogenesis of

lupus nephritis.

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DOCUMENT NUMBER: 92190431

TITLE: Transient lupus anticoagulant induced by Epstein-

Barr virus infection.

AUTHOR: Yamazaki M; Asakura H; Kawamura Y; Ohka T; Endo M; Matsuda

T

CORPORATE SOURCE: Department of Internal Medicine (III), Kanazawa University

School of Medicine, Japan.

SOURCE: BLOOD COAGULATION AND FIBRINOLYSIS, (1991 Dec) 2 (6)

771-4.

Journal code: A5J. ISSN: 0957-5235.

PUB. COUNTRY: ENGLAND: United Kingdom

Journal; Article; (JOURNAL ARTICLE)

LANGUAGE: English

FILE SEGMENT: Priority Journals

ENTRY MONTH: 199206

AB A 25-year-old woman presented with an episode of left calf deep vein thrombosis and pulmonary thrombosis. She was found to have a lupus

anticoagulant with anticardiolipin antibodies, some

autoimmune antibodies and antibodies for

primary Epstein-Barr (EB) virus infection. Six months later, lupus

anticoagulant and other autoimmune antibodies were

found to be negative and EB virus **antibodies** were shown to be seroconverted. We suggest that the transient presence of lupus anticoagulant was due to EB virus infection caused by activation of

pòlyclonal B-lymphocytes.

## 08/781,296

- L4 ANSWER 23 OF 26 CANCERLIT
- AN 86620257 CANCERLIT
- DN 86620257
- TI MAPPING THE ANTIGENIC REGIONS OF EPSTEIN-BARR NUCLEAR ANTIGEN USING SYNTHETIC PEPTIDES.
- AU Rhodes G; Houghten R A; Carson D A; Valbracht J; Vaughan J H
- CS Scripps Clinic and Research Foundation, La Jolla, CA 92037.
- SO UCLA Symp Mol Cell Biol, (1984). New Ser 21, pp. 487-96.
- DT (MEETING PAPER)
- FS ICDB
- LA English
- EM 198604
- The viral DNA encoding for the Epstein-Barr nuclear antigen ( AΒ EBNA) contains a repeating sequence that is expressed as a run of over 200 amino acids consisting only of glycine and alanine. The authors synthesized nine peptides from the middle, ends, and outside of this repeating region of the protein; six of these peptides were used to detect antibodies to EBNA in human sera. Antipeptide activities of specimens of human sera were measured with the aid of an enzyme-linked assay in microtiter plates. No sera of 27 individuals who were Epstein-Barr viral capsid antigen (VCA) negative reacted against any of six peptides used in the assay; in contrast, all VCA+ samples reacted with the peptides, the highest recognition generally occurring with the peptides containing all glycine and alanine. IgG antibody titers to the peptides in patients with acute and convalescent mononucleosis rose in conjunction with those directed against EBNA. When tested at a dilution of 1/320, sera of rheumatoid arthritis patients had antibody levels higher than those for normal subjects, for every peptide tested; systemic lupus erythematosus patients had an average titer higher than that for normal subjects, only for the glycine-alanine-containing peptides. Antibody titers of sera from Sjorgren syndrome and progressive systemic sclerosis patients had titers that did not differ from those of normal subjects. Sera with high titers to EBNA recognized some of the peptide sequences better than others; this finding implies that human antibodies to EBNA are directed at selected portions of the protein. Further studies of peptides should provide a method of mapping the antigenic determinants. (12 Refs)

ACCESSION NUMBER:

97104028 EMBASE

DOCUMENT NUMBER:

1997104028

TITLE:

Immunoblotting reactivity of sera from patients with

autoimmune connective tissue diseases against

Epstein-Barr nuclear antigen (EBNA) polypeptides.

AUTHOR:

Ngou J.; Segondy M.

CORPORATE SOURCE:

M. Segondy, Laboratoire de Virologie, Hopital Saint-Eloi, Centre Hospitalier Universitaire, 34295 Montpellier Cedex

5, France

SOURCE:

Serodiagnosis and Immunotherapy in Infectious Disease,

(1996) 8/2 (105-108).

Refs: 21

ISSN: 0888-0786 CODEN: SIIDE3

PUBLISHER IDENT .:

S 0888-0786(96)01059-1

COUNTRY:

Netherlands

DOCUMENT TYPE:

Journal; Article

FILE SEGMENT:

Microbiology 004 Immunology, Serology and Transplantation

026

English

LANGUAGE: SUMMARY LANGUAGE:

English

The antibody responses to Epstein-Barr nuclear antigen (EBNA) polypeptides were analyzed by immunoblotting in 93 patients with autoimmune connective tissue diseases (ACTD) in comparison with 50 clinically healthy control subjects. Antibody frequencies to

EBNA-2, -4, and -6 were significantly higher in patients than in

controls.

Among the patients with ACTD, those with systemic lupus erythematosus (SLE) showed a significant increase in the frequency of anti-EBNA-3 antibodies. These results confirm the particularity of the antibody responses against Epstein-Barr

virus (EBV) polypeptides in patients with ACTD; they could either reflect basic immune disturbances or suggest a participation of EBV in

the

pathogenesis of the disease.

ACCESSION NUMBER: 87216595 MEDLINE

DOCUMENT NUMBER: 87216595

TITLE: Expression of a germline human kappa chain-associated

cross-reactive idiotype after in vitro

and in vivo infection with Epstein-Barr virus.

AUTHOR: Silverman G J; Carson D A; Patrick K; Vaughan J H; Fong S

CONTRACT NUMBER: AG 04100 (NIA) AM 25443 (NIADDK)

AM 21175 (NIADDK)

+

SOURCE: CLINICAL IMMUNOLOGY AND IMMUNOPATHOLOGY, (1987 Jun) 43 (3)

403-11.

Journal code: DEA. ISSN: 0090-1229.

PUB. COUNTRY: United States

Journal; Article; (JOURNAL ARTICLE)

LANGUAGE: English

FILE SEGMENT: Priority Journals; Cancer Journals

ENTRY MONTH: 198709

AB The mouse monoclonal antibody 17.109 recognizes a cross

-reactive idiotype (CRI) associated with kappa IIIb light chains of human IgM-rheumatoid factor (RF) paraproteins. The 17.109 idiotypic determinant is encoded by one or a group of closely related V kappa

The association of the idiotype with IgM- and IgA-rheumatoid factors in certain autoimmune diseases necessitates an understanding of how human B lymphocytes can be induced to express the idiotype. To investigate the cellular expression of the 17.109 CRI, peripheral blood lymphocytes from normal donors were stimulated in vitro with Epstein-Barr virus (EBV) and pokeweed mitogen (PWM). EBV induced greater expression of IgM-associated 17.109 CRI than did PWM. The 17.109 CRI was preferentially associated with IgM rather than with IgG.

In

vivo EBV infection was studied in college students with infectious mononucleosis and displayed similar elevation of IgM-associated 17.109

CRI

in sera obtained at presentation of clinical illness. Later, IgM levels declined while IgG-associated 17.109 CRI rose. The 17.109 idiotype was unrelated to antibodies against the Epstein-Barr virus nuclear antigen and the viral capsid antigen and was probably due to generalized activation of early B cells. These observations support the hypothesis that the 17.109 CRI is expressed by

in

vitro and in vivo EBV-infected cells. The 17.109 idiotype identifies a highly conserved V kappa gene product, which is expressed preferentially after EBV infection, but not exclusively with RF autoantibodies.

DOCUMENT NUMBER:

1994084024

TITLE:

Soluble Fc.epsilon.RII/CD23 in patients with

autoimmune diseases and Epstein-

Barr virus-related disorders: Analysis by ELISA for soluble Fc.epsilon.RII/CD23.

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The low-affinity  $\bar{\text{Fc}}$  receptor for IgE (Fc.epsilon.R $^{\ddagger}$ I/CD23) and its soluble

form (sCD23, IgE-binding factor) have multiple functions, and enhanced levels of these are associated with various immunological diseases. We established two sensitive ELISA systems using enzyme-conjugated mAb and biotinylated mAb. The detection limits of the ELISA systems were 0.03 and 1.0 ng/ml, which showed good correlation in the range 1.0-10 ng/ml. In

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ELISA system using enzyme-conjugated mAb, the average sCD23 concentration in 303 normal healthy volunteers was 1.4 .+-. 0.3 ng/ml. In the ELISA system using biotinylated mAb, sCD23 levels in normal healthy volunteers showed almost the same values. In patients with autoimmune diseases such as rheumatoid arthritis, systemic lupus erythematosus, Sjogren syndrome, progressive systemic sclerosis, and mixed connective tissue disease, the sCD23 levels were significantly higher than those in normal individuals. Furthermore, in Epstein-Barr virus-related disorders after liver transplantation with immunosuppression, plasma levels of sCD23 rapidly increased to more than 12 ng/ml when clinical symptoms were evident. In addition, the sCD23 values remained high, although elevated GOT levels gradually decreased to standard values and EBV hepatitis improved. These data suggest that sCD23 levels are a sensitive marker of autoimmune diseases and  ${\tt EBV-related}$  disorders in addition to allergic disorders. The ELISA system for sCD23 may be an additional diagnostic tool in estimating the clinical courses of these diseases.